

# COPY

Do not detach—Return all copies

Do Not Write Above This Line—For Headquarters Office Only

**APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)**

To: Department of Alcoholic Beverage Control  
1901 Broadway  
Sacramento, Calif. 95818 Stockton  
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for  
licenses described as follows:

**2. NAME(S) OF APPLICANT(S)**

~~XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX~~

WAREHAM, Sandra K.

WEAVER, Larry G.

**1. TYPE(S) OF LICENSE(S)**

On Sale Beer & Wine  
Public Premises

Applied under Sec. 24044 ☐

Effective Date: Issuance

**FILE NO.****RECEIPT NO.**

55626  
**GEOGRAPHICAL  
CODE 3902**  
Date  
Issued

Temp. Permit

55626

Effective Date: 6-1-88

**3. TYPE(S) OF TRANSACTION(S)**

Per to Per

**FEE**

\$ 150.00

**LIC.  
TYPE**

42

**4. Name of Business**

The Corner Pocket

**5. Location of Business—Number and Street**

725 S. Cherokee Lane

City and Zip Code

Lodi, 95240

County

San Joaquin

TOTAL

\$ 150.00

**6. If Premises licensed,  
Show Type of License**

42

**7. Are Premises Inside  
City Limits?**

Yes

**8. Mailing Address (if different from 5)—Number and Street**

Same

(Temp) (Perm)

**9. Have you ever been convicted of a felony?**

No See 10

**10. Have you ever violated any of the provisions of the Alcoholic  
Beverage Control Act or regulations of the Department per-  
taining to the Ac?**

No See 10

11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.

12. Applicant agrees (a) that any manager employed in on-sale licensed premises will have all the qualifications of a licensee, and  
(b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

**13. STATE OF CALIFORNIA**

County of

San Joaquin

Date

5-19-88

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

**14. APPLICANT  
SIGN HERE**

Larry G. Weaver

**APPLICATION BY TRANSFEROR****15. STATE OF CALIFORNIA**

County of

~~San Joaquin~~ San Joaquin

Date

5-19-88

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the licensee, or an executive officer of the corporate licensee, named in the foregoing application, duly authorized to make this transfer application on its behalf; (2) that he hereby makes application to surrender all interest in the attached license(s) described below and to transfer same to the applicant and/or location indicated on the upper portion of this application form, if such transfer is approved by the Director; (3) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (4) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

**16. Name(s) of Licensee(s)**

Robert W. Smith

Jo L. Smith

**17. Signature(s) of Licensee(s)**

[Signature]  
[Signature]

**18. License Number(s)**

42-168755

" "

**19. Location**

Number and Street

City and Zip Code

County

Same Location

Do Not Write Below This Line; For Department Use Only

Attached: ☒ Recorded notice,  
☐ Fiduciary papers,

☒ 280

(OTHER)

COPIES MAILED 5-19-88

☐ Renewal Fee of

Paid at

Office on

Receipt No.

# COPY

Do not detach—Return all copies

Do Not Write Above This Line—For Headquarters Office Only

**APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)**

To: Department of Alcoholic Beverage Control  
1901 Broadway  
Sacramento, Calif. 95818

SEQUESTRATION

(DISTRICT SERVING LOCATION)

The undersigned hereby applies for  
licenses described as follows:

**2. NAME(S) OF APPLICANT(S)**

X COLE, Julio A.

MANZANARES, Jose F.

**1. TYPE(S) OF LICENSE(S)**

On Sale Beer & Wine  
Eating Place

Applied under Sec. 24044 ☐

Effective Date:

**FILE NO.**

RECEIPT NO.

GEOGRAPHICAL

CODE 3902

Date

Issued

Temp. Permit

Effective Date:

**3. TYPE(S) OF TRANSACTION(S)**

FEE

LIC.

TYPE

~~Original License~~ Per to Per

\$ 150.00

41

**4. Name of Business**

Versino's Restaurant &amp; Deli

**5. Location of Business—Number and Street**

302 S. Crescent Ave.

City and Zip Code

95240

County

San Joaquin

TOTAL

\$ 150.00

**6. If Premises Licensed,**

Show Type of License 41

**7. Are Premises Inside**

City Limits? Yes

**8. Mailing Address (if different from 5)—Number and Street**

Same

(Temp) (Perm)

Perm

**9. Have you ever been convicted of a felony?**

No

**10. Have you ever violated any of the provisions of the Alcoholic Beverage Control Act or regulations of the Department pertaining to the Act?**

No

11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.

12. Applicant agrees (a) that any manager employed in on-sale licensed premises will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

**13. STATE OF CALIFORNIA**

County of San Joaquin

Date 5-17-88

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

**14. APPLICANT**

SIGN HERE

X Jose Florentino Manzanares

X Julio A. Cole

**APPLICATION BY TRANSFEROR****15. STATE OF CALIFORNIA**

County of San Joaquin

Date 5-17-88

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the licensee, or an executive officer of the corporate licensee, named in the foregoing transfer application, duly authorized to make this transfer application on its behalf; (2) that he hereby makes application to surrender all interest in the attached license(s) described below and to transfer same to the applicant and/or location indicated on the upper portion of this application form; if such transfer is approved by the Director; (3) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (4) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

**16. Name(s) of Licensee(s)****17. Signature(s) of Licensee(s)****18. License Number(s)**

Thomas R. O'Connor

Thomas R. O'Connor

41-162885

Joann M. O'Connor

Joann M. O'Connor

41-162885

**19. Location**

Number and Street

City and Zip Code

County

Same Location

Do Not Write Below This Line; For Department Use Only

Attached: ☐ Recorded notice,☐ Fiduciary papers,☐ (OTHER)

COPIES MAILED

5-17-88

☐ Renewal: Fee of

Paid at

Office on

Receipt No.